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08/24/2006

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11/22/2006 EAREGAY2 00000024 10663383

01 FC:1504 300.00 OP  
02 FC:8001 30.00 OP  
03 FC:1501 1400.00 OP

Christian A. Fox (Depositor's name)  
Cust A. (Signature)  
11/20/2006 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/663,383	09/16/2003	Arun Prasad Amarendran	4982/27	1610

TITLE OF INVENTION: SYSTEM AND METHOD FOR BLIND MEDIA SUPPORT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0	\$1000	11/24/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
LEROUX, ETIENNE PIERRE	2161	707-104100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
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Knobbe, Martens,  
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

CommVault Systems, Inc.

Oceanport, New Jersey

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☒ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Cust A. Fox

Date 11/20/2006

Typed or printed name Christian A. Fox

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